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CONFIRMATION NO. 1829

SERIAL NUMBER 10/658,793	FILING DATE 09/10/2003 RULE	CLASS 128	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 82058-0013
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APPLICANTS

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** CONTINUING DATA *****

Yes MF
 This application is a CON of 09/696,170 10/26/2000 PAT 6,742,517
 which claims benefit of 60/162,131 10/29/1999

** FOREIGN APPLICATIONS *****

NONE MF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/02/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 3	TOTAL CLAIMS 45/17	INDEPENDENT CLAIMS 21
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

31625
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 PATENT DEPARTMENT
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 AUSTIN, TX
 78701-4039

TITLE

High efficiency liquid oxygen system

FILING FEE

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time)

<p>RECEIVED 1350</p>	<p>No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit</td> </tr> </table>	<input type="checkbox"/>	1.18 Fees (Issue)	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit
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